

**CHARLOTTE – MECKLENBURG POLICE DEPARTMENT**  
*High School Police Academy Application*



Date (mm/dd/yyyy)

**Applicant Information**

Last Name:		First Name:		Nicknames or Aliases:	
Date of Birth:	Age:	Race:		Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Home Address:		City:	State:		Zip Code:
Email Address:		Home Phone #:		Mobile Phone #:	
High School Attending:		Current Grade Level:			
School Resource Officer's (SRO) Name:		SRO's Email Address:			
School Guidance Counselor's Name:		Counselor's Email Address:			
T-Shirt Size: S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/>					

**Parent / Guardian Information**

Parent/Guardian Name(s):		Home Phone #:		Work Phone #:	
Home Address:		City:	State:		Zip Code:

**Emergency Contact Information**

Emergency Contact Name(s):		Relationship:	
Work Phone:	Home Phone:		Mobile Phone:

**Criminal History**

	Yes	No
Do you live in Mecklenburg County?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been arrested?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been suspended from school in the last 2 years?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever used illegal drugs?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been issued a traffic citation?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered YES to any of the above questions, please explain below:

## Questions

**1. What do you hope to gain by attending the High School Police Academy?**

**2. What type of community and/or volunteer activities do you participate in and how do you think that these activities impact our society?**

**3. Tell us something about yourself? How do you like to spend your free time (Hobbies)?**

**4. Due to recent events in the media what is your opinion of the Law Enforcement?**

**5. What qualities and/or characteristics may distinguish you from other applicants?**